PTO/SB/05 (08-03)
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| 1                                | The state of the s |                      |                                       |              |  |                    |          |                  |                 |          | ss it displays a valid OMB control number |  |  |
|----------------------------------|--|----------------------|---------------------------------------|--------------|--|--------------------|----------|------------------|-----------------|----------|---|--|--|
| Substitute for Form PTO-875      |  |                      |                                       |              |  |                    |          |                  |                 | 17       | Application or Docket Number              |  |  |
| CLAIMS AS FILED - PART I         |  |                      |                                       |              |  |                    |          |                  |                 |          | 107                                       | 7.00   |  |
| (Column 1) (Column 2)            |  |                      |                                       |              |  |                    |          | SMAL             | LENTITY         | QF       | : QTI-<br>SMAI                            | IER THAN<br>LL ENTITY                            |  |
| 6.                               | BASIC FEE NUMBER FILED   |                      |                                       |              |  | HBER EXTRA         | _        | RATE             | . FEE           | 1        | RATE                                      |  |  |
| . (3                             | 7 CFR 1.16(a))<br>OTAL CLAIMS  |                      | · · · · · · · · · · · · · · · · · · · |              |  |                    | 1        |                  | 5               |          |   | FEE  |  |
|                                  | 7 CFR 1.16(c))   |                      |                                       | 20 =         |  | 7                  | X \$ =   |                  | - · OR          | -        |   |  |  |
| (3:                              | DEPENDENT CL<br>7 CFR 1.16(b))   | AIMS                 | minus                                 |              | 3 = .  | <del></del>        | 1        | <del></del>      |                 | OR       | X \$=                                     |  |  |
| MULTIPLE DEPENDENT CLAIM PRESENT |  |                      |                                       |              | (37 CFR 1.16(d))                                     |                    | 1        | X 1 =            | <del></del>     | · OR     | X \$=                                     | ·  |  |
|                                  |  |                      |                                       |              |  |                    |          | +1 =             | <del></del>     | OR       | +5=                                       |  |  |
| Ü                                | * If the difference in column 1 is less than zero, enter *0* in column 2   |                      |                                       |              |  |                    |          | TOTAL            |                 | OR       | TOTAL                                     |  |  |
| N.                               | 000  | CLAIM                | S AS AN                               | IENDE        | D – PART II  |                    |          |                  |                 |          |   |  |  |
| 1                                | 1-27-06 (Column 1) (Column 2) (Column 3)   |                      |                                       |              |  |                    |          | 0                | _               | OR       | OTHE                                      | R THAN   |  |
|                                  |  | C                    | LAIMS                                 |              | HIGHEST  | <del>1</del>       | 7 [      | SMALL            | ENTITY          | ייט      | SMALL                                     | ENTITY   |  |
| F                                |  | A                    | MAINING<br>FTER                       | 1            | NUMBER<br>PREVIOUSLY                                 | PRESENT<br>EXTRA   | 11       | RATE             | ADOI-           | 1        | RATE                                      | ADDI:  |  |
| AMENDMENT                        | Total · 1  |                      | NOMENT                                | Minus        | PAID FOR   |                    | 1        |                  | TIONAL<br>FEE   |          | 1   | TIONAL   |  |
|                                  | (37 CFR 1.16(c))   | 1.5                  | <del>/</del>                          | <del> </del> | 20   |                    |          | X \$ =           |                 | OR       | X S =                                     |  |  |
|                                  | (37 CFR 1,16(b))   |                      | <u></u>                               | Minus        | 4  |                    |          | x s =            |                 | OR       | x s =                                     |  |  |
| _ <                              | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  |                      |                                       |              |  |                    |          | + s =            |                 | OR OR    |   | <del>                                     </del> |  |
|                                  |  |                      |                                       |              |  |                    |          | TOTAL            | -               | OR       | TOTAL =                                   | -/   |  |
|                                  |  | (Colu                | rin 1)                                |              | <b>10</b> 1 = 1                                      |                    |          | AOO'L FEE        |                 | OR       | ADO'L FEE                                 | L/   |  |
|                                  |  | ···cu                | AMAS                                  |              | (Column 2)   | (Column 3)         | r        |                  | <del>:</del>    |          |   |  |  |
| AMENDMENT                        |  | AF                   | AINING<br>TER                         |              | NUMBER<br>PREVIOUSLY                                 | PRESENT<br>EXTRA   |          | RATE             | ADDI-           |          | RATE                                      | ADDI-  |  |
|                                  | Total  | ·                    | DMENT                                 | Minus        | PAID FOR   | =                  | L        |                  | TIONAL.<br>FEE  |          |   | TIONAL<br>FEE                                    |  |
|                                  | (27 CFR 1,16(c))   |                      |                                       | <u> </u>     | •••  |                    | . ],     | ( <b>s</b> .=    |                 | OR       | X \$ =.                                   |  |  |
| ME                               | (37 OFR 1,16(b))   |                      | l                                     | Minus        |  | =                  | ,        | : \$=            |                 | OR       | x s =                                     |  |  |
| ۲                                | FIRST PRESENT  | ATION OF             | HULTIPLE                              | DEPENO       | ENT CLAMA (37 CF                                     | A : Itics;         | Γ.       | · s =            |                 | OR       |   |  |  |
|                                  |  |                      |                                       |              |  |                    | T        | OTAL<br>OO'L FEE |                 |          | TOTAL                                     |  |  |
|                                  | •  | (Colur               | no '11                                |              | <b>10.1</b> 5.                                       |                    | ~        | OUCFEE (         |                 | OR       | ADDIL FEE                                 |  |  |
| T                                |  | CLA                  | IMS                                   |              | (Column 2) HIGHEST                                   | (Column 3)         | $\Gamma$ |                  | <del></del>     | ,        |   |  |  |
| AMENDMENT                        |  | REMA<br>AFT<br>AMENO | ER                                    |              | NUMBER<br>PREVIOUSLY<br>PAID FOR                     | PRESENT<br>EXTRA   |          | RATE             | ADDI-<br>TRONAL |          | RATE                                      | ADDI-<br>TIONAL                                  |  |
| 亂                                | Total<br>(37 CFR 1.16(c))  | •                    |                                       | Minus        |  | =                  |          |                  | FEE             | ŀ        |   | FEE  |  |
| 띪                                | Independent<br>(37 CFR 1 16(b))  | _                    |                                       | Minus        | ***  | -                  | ×        |                  |                 | OR .     | × \$ =                                    |  |  |
| 4                                | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR + 1647)   |                      |                                       |              |  |                    |          |                  |                 | OR       | × \$=                                     |  |  |
|                                  |  |                      | <del></del>                           |              | 13. 0.1  | 1.10(0))           | +        | 1 =              |                 | Ou [     | + s =                                     |  |  |
|                                  | . If the entry in column 1 is less than the enterior and in a second   |                      |                                       |              |  |                    |          |                  |                 | OR       | ADD'L FEE                                 | 7  |  |
| • • •                            | If the "Highest N  | umber Pr             | enously i                             | and For      | IN THIS SPACE IS                                     | s less than 20, cr | iler 2   | 10.              |                 |          | ٠.  |  |  |
|                                  |  |                      |                                       |              | N THIS SPACE is olal or Independe R 1.16. The inform |                    |          | ber found in th  | е аррюовале     | bor n co | umus I                                    |  |  |
|                                  | moins of miom  | ISI NUIFO            | required b                            | y 37 CFF     | R 1 16 The inform                                    | nation is convice  | 1 10 0   | his a            | <u></u>         |          | with t                                    |  |  |

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. USD 10 to process) an application. Continentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering preparing and submitting the completed application form to the USP 10. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450. Alexandria, VA.22313-1450. DO NOT SENO FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO Commissioner for Patents, P. O. Box 1450, Alexandria, VA 27313-1450